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CONFIRMATION NO. 1354

<b>SERIAL NUMBER</b> 10/792,025	<b>FILING OR 371(c) DATE</b> 03/03/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 1779-10	
<b>APPLICANTS</b> Edward L. Galloway, Beaumont, TX; Eric Petersen, Beaumont, TX; Tipton Golias, Beaumont, TX;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/628,199 07/28/2003					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/21/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> 10/5/06 Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> John S. Egbert Harrison & Egbert 412 Main Street, 7th Floor Houston, TX 77002					
<b>TITLE</b> Load-controlled device for a patterned skin incision					
<b>FILING FEE RECEIVED</b> 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		